

Fill in this information to identify the case:

Debtor name	CWI Cherokee LF LLC		
United States Bankruptcy Court for the:	Northern	District of	Georgia (State)
Case number (If known):	23-52262-sms		

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/23</u> MM / DD / YYYY	to <u>Filing date</u>	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>1,622,124</u>
For prior year:	From <u>01/01/22</u> MM / DD / YYYY	to <u>12/31/22</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>9,108,926</u>
For the year before that:	From <u>01/01/21</u> MM / DD / YYYY	to <u>12/31/21</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>8,053,045</u>

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

Description of sources of revenue			Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>NA</u> MM / DD / YYYY	to <u>Filing date</u>	\$ _____
For prior year:	From <u>01/01/22</u> MM / DD / YYYY	to <u>12/31/22</u> MM / DD / YYYY	<u>Insurance Settlement</u> \$ <u>125,000</u>
For the year before that:	From <u>01/01/21</u> MM / DD / YYYY	to <u>12/31/21</u> MM / DD / YYYY	<u>Insurance Settlement</u> \$ <u>95,000</u>

Debtor CWI Cherokee LF LLC _____ Case number (if known) 23-52262-sms
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Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1.			
Please see attached sheets for all transfers Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		
3.2.			
Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1.			
Steve Witmer Insider's name 3284 Northside Parkway, Suite 600 Street _____	_____	\$ Estimated \$240,000	Management _____
Atlanta _____ GA _____ 30327 City _____ State _____ ZIP Code _____	_____		
Relationship to debtor _____			
4.2.			
Insider's name _____	_____	\$ _____	_____
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		
Relationship to debtor _____			

Form 207 (Statement of Financial Affairs), Part 2, Section 3

3.1 Caterpillar Financial Services (26,282.60)

P.O. Box 730681
Dalles, Texas 75373
Vendor

3.2 Alabama Dept. of Revenue (70,519.17)

50 N. Ripley Street
Montgomery, Alabama 36130
Taxes

3.3 Atomic Transportation (398,759.07)

Accounting Offices	Corporate Headquarters
7105 Gault Ave. N.	1301 Riverfront Parkway
Fort Payne, Alabama 35967	Chattanooga, TN 37402
Vendor	

3.4 Auto-Owners Insurance (8,160.71)

Corporate Address
6101 Anacapri BLVD.
Lansing, MI 48917
Insurance

3.5 Blue Cross Blue Shield of Alabama (42,534.84)

Payment Processing	Corporate Headquarters
P.O. Box 360037	450 Riverchase Parkway East
Birmingham, Alabama 35236-0037	Birmingham, Alabama 35244
Insurance	

3.6 Blue Vine (27,957.66)

Corporate Headquarters
401 Warren Street
Redwood City, CA 94063

Vendor

3.7 Caterpillar Financial (34,374.15)

P.O. Box 730681
Dallas, TX 75373

Corporate Headquarters
2120 West End Avenue
Nashville, TN 37203

Vendor

3.8 Clifton Larson Allen LLC (8,333.50)

P.O. Box 740863
Atlanta, GA 30374-0863

3575 Piedmont Road NE
Building 15, Suite 1550
Atlanta, GA 30305

Services account

3.9 CWI Transfer HSV (24,000.00)

3284 Northside Parkway
Suite 600
Atlanta, GA 30327
Lease

3.10 CWI Enterprises (177,471.57)

3284 Northside Parkway
Suite 600
Atlanta, GA 30327
Note

3.11 Evergreen Environmental (252,738.00)

111 Northway Road, Suite D
Columbia, SC 29201
Vendor

3.12 Fundamental (49,293.26)

100 Garden City Plaza
Suite 410
Garden City, New York 11530

Working Capital

3.13 ISCO Industries, Inc. (8,348.43)

1974 Solutions Center
Chicago, IL 60677-1009

Corporate Headquarters
100 Witherspoon Street
2 West
Louisville, KY 40202

Vendor

3.14 JLW Contracting LLC (74,500.00)

2310 Bennett Road
Jasper, AL 35503
Vendor

3.15 Mid-South Septic (124,363.50)

11284 Gulf Stream Road
Arlington, TN 38002
Leachate disposal

3.16 P & F Industrial Enterprises (63,714.70)

1140 4th Street
Cherokee, AL 35616
Royalty Payments

3.17 SEAM Financial, LLC (8,921.64)

(Premium Finance)
807 W. HWY 50 Ste. 4, P.O. Box 1506
O'Fallon, IL 62269
Insurance

3.18 Regions Bank (546,822.70)

Corporate Trust Operations
250 Riverchase Parkway, E.
4th Floor
Birmingham, AL 35244

Revenue Account

3.19 Stephen E. Witmer (128,786.64)

3284 Northside Parkway
Suite 600
Atlanta, GA 30327
Management Fees

3.20 Sibley Oil (8,269.80)

1070 Tennessee Street
Courtland, AL 35618
Fuel

3.21 Schreeder Wheeler Flint, LLP (75,000.00)

1100 Peachtree Street NE
Suite 800
Atlanta, GA 30309
Legal Services

3.22 Tanner Guin (10,000.00)

2711 University Blvd.
Suite 201
Tuscaloosa, AL 35401
Legal

3.23 Thompson Tractor Co., Inc. (24,226.50)

P.O. Box 934005
Atlanta, GA 31193-4005
Equipment Repair and Rental

3.24 Vulcan (13,395.70)

23314 HWY 72
Tuscumbia, AL 35674
Stone

3.25 Waste Connections (347,467.88)

3 Waterway Square PL
The Woodlands, TX 77380
MSW Disposal

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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
5.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
_____	_____	_____	_____
Last 4 digits of account number: XXXX- _____	_____	_____	_____

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. Solid Waste Disposal Authorities v. CWI Cherokee LF, LLC, and Stephen E. Witmer	Circuit Court of Colbert County, Alabama Name 201 N Main Street Street	Circuit Court of Colbert County, Alabama Name 201 N Main Street Street	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 20-CV-2023-900033.00	Tuscumbia AL 35674 City State ZIP Code	Tuscumbia AL 35674 City State ZIP Code	
Case title 7.2. Cherokee Industrial Landfill Permit No. 17-10	Court or agency's name and address Alabama Department of Environmental Management Name 1400 Coliseum Blvd Street	Court or agency's name and address Alabama Department of Environmental Management Name 1400 Coliseum Blvd Street	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 23-037-SW	Montgomery AL 36110 City State ZIP Code	Montgomery AL 36110 City State ZIP Code	

Debtor

CWI Cherokee LF LLC

Name

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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None

Custodian's name and address	Description of the property	Value
Jeffrey L. Claunch Custodian's name 250 Commerce Street, 3rd Floor Street	Landfill	\$ _____
Case title	Court name and address	
Solid Waste Disposal Authorities v. CWI Cherokee LF, LLC, and Stephen E. Witmer	Circuit Court of Colbert County, Alabama	
Case number	Name	
20-CV-2023-900033.00	201 N Main Street	
Date of order or assignment	City	AL
March 1, 2023, but hearing on March 8 to make order permanent	State	35674
	ZIP Code	

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000** None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
Willie Green Recreation Center Recipient's name 609 S East Street Street	Donation for Youth Football League		\$ 5000
Tuscumbia AL 35674 City State ZIP Code			
Recipient's relationship to debtor			
Donation			
Curtis Roberts Recipient's name Street	2017 2500 Denali Truck	09/01/22	\$ 5000
City State ZIP Code			
Recipient's relationship to debtor			
Employee			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.			
List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).			
		\$ _____	

Debtor CWI Cherokee LF LLC _____ Case number (if known) 23-52262-sms
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Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Schreeder, Wheeler & Flint LLP		March 7, 2023	\$ 75,000
	Address			
	1100 Peachtree Street			
	Street			
	Suite 800			
	Atlanta	GA	30309	
	City	State	ZIP Code	
	Email or website address			
	swfllp.com			
	Who made the payment, if not debtor?			
	NA			
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.				\$ _____
	Address			
	Street			
	City	State	ZIP Code	
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
_____	_____	_____	\$ _____
Trustee	_____		
_____	_____		

Debtor CWI Cherokee LF LLC
Name _____

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13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
------------------------	--	------------------------	-----------------------

13.1. _____ \$ _____

AddressStreet _____

City _____ State _____ ZIP Code _____

Relationship to debtor_____
_____**Who received transfer?**_____
_____ \$ _____

13.2. _____

AddressStreet _____

City _____ State _____ ZIP Code _____

Relationship to debtor_____
_____**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. Street _____ _____	From _____ To _____
City _____ State _____ ZIP Code _____	
14.2. Street _____ _____	From _____ To _____
City _____ State _____ ZIP Code _____	

Debtor

CWI Cherokee LF LLC

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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.**Facility name and address****Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1.

Facility name

Street

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.**How are records kept?***Check all that apply:*

- Electronically
- Paper

City State ZIP Code

Facility name and address**Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.2.

Facility name

Street

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.**How are records kept?***Check all that apply:*

- Electronically
- Paper

City State ZIP Code

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?** No. Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- No
- Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan**Employer identification number of the plan**

EIN: _____ - _____ - _____ - _____ - _____

Has the plan been terminated?

- No
- Yes

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Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____	_____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Address _____ _____			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____	_____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Address _____ _____			

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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
_____	Alabama Department of Environmental Management Name 1400 Coliseum Blvd Street	Consent Order	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number <u>Order Nos. 22-110-CWP; 23-037-SW</u>	Montgomery AL 36110 City State ZIP Code		

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Debtor CWI Cherokee LF LLC
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- No
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____ Street _____ _____	Name _____ Street _____ _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	_____

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	CWI Alabama LLC Name _____ 3284 Northside Parkway, Suite 600 Street _____ Atlanta GA 30327 City State ZIP Code _____	_____	EIN: 8 2 - 1 9 7 2 0 8 6 Dates business existed From _____ To Present
25.2.	Business name and address Name _____ Street _____ _____ City State ZIP Code _____	Describe the nature of the business _____	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
25.3.	Business name and address Name _____ Street _____ _____ City State ZIP Code _____	Describe the nature of the business _____	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____

Debtor CWI Cherokee LF LLC _____ Case number (if known) 23-52262-sms
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address			Dates of service	
26a.1. Norton Underwood			From 6-23-2020 To 3-31-2022	
Name 102 N Main Street	Street			
Tuscumbia	AL	35674		
City	State	ZIP Code		
Name and address			Dates of service	
26a.2. CliftonLarsonAllen LLP			From 4-1-2022 To Present	
Name 3575 Piedmont Road NE	Street	Suite 1550		
Atlanta	GA	30305		
City	State	ZIP Code		

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address			Dates of service	
26b.1. CliftonLarsonAllen LLP			From _____ To _____	
Name 3575 Piedmont Road NE	Street	Suite 1550		
Atlanta	GA	30305		
City	State	ZIP Code		
Name and address			Dates of service	
26b.2.			From _____ To _____	
Name	Street			
City	State	ZIP Code		

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address			If any books of account and records are unavailable, explain why	
26c.1. CliftonLarsonAllen LLP				
Name 3575 Piedmont Road NE	Street	Suite 1550		
Atlanta	GA	30305		
City	State	ZIP Code		

Debtor CWI Cherokee LF LLC _____ Case number (if known) 23-52262-sms _____
Name _____

Name and address

If any books of account and records are unavailable, explain why

26c.2.

Name _____

Street _____

City _____ State _____ ZIP Code _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

Name and address

26d.1. Municipal Securities Rulemaking Board (MSRB)

Name _____

1300 I Street _____

Street _____

Suite 1000 _____

Washington _____ D.C. _____ 20005 _____

City _____ State _____ ZIP Code _____

Name and address

26d.2. Rice Advisory

Name _____

250 Commerce Street _____

Street _____

3rd Floor _____

Montgomery _____ AL _____ 36104 _____

City _____ State _____ ZIP Code _____

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name _____

Street _____

City _____ State _____ ZIP Code _____

Debtor

CWI Cherokee LF LLC

Name

Case number (if known)

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Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
		\$

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Steve Witmer	3284 Northside Parkway, Suite 600	CWI Alabama Member LLC	
	Manager	owns 100% of debtor	
		Witmer owns 60% of	
		CWI Alabama Member LLC	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

 No Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From _____ To _____
			From _____ To _____
			From _____ To _____
			From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

 No Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
Steve Witmer Name 3284 Northside Parkway, Suite 600 Street	Estimated \$240,000		Management
Atlanta City	GA State	30327 ZIP Code	
Relationship to debtor			

Debtor CWI Cherokee LF LLC
Name

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Name and address of recipient

302

Name _____
Street _____
City _____ State _____ ZIP Code _____

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- No
 Yes. Identify below.

Name of the parent corporation

Employer identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- No
 Yes. Identify below.

Name of the pension fund

Employer identification number of the pension fund

EIN: _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

04/04/2023

MM / DD / YYYY



Signature of individual signing on behalf of the debtor

Printed name

Position or relationship to debtor

Stephen E. Wilner
Member / Manager

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No
 Yes

Fill in this information to identify the case:

Debtor name CWI CHEROKEE LF LLC
 United States Bankruptcy Court for the: NORTHERN District of GEORGIA
 (State)
 Case number (If known): 23-52262-sms

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest		
2. Cash on hand	\$ _____		
3. Checking, savings, money market, or financial brokerage accounts (<i>Identify all</i>)			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. PNC Bank	Checking	6 8 2 5	\$ 58,175.59
3.2. Regions Bank	Checking	6 6 1 3	\$ 4,696.96
First Metro Bank	Checking	7 3 4 4	12,959.71
4. Other cash equivalents (<i>Identify all</i>)			
4.1. Bond Funds (Regions Bank)			\$ 2,114,841.11
4.2. _____			\$ _____
5. Total of Part 1	\$ 2,190,673		
Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.			

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes. Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit
 7.1. _____ \$ _____
 7.2. _____ \$ _____

Current value of debtor's interest

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____
 8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less:	432,624	-	0	= ➔	\$ 432,624
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	680,174.40	-	193,837	= ➔	\$ 486,337
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ **918,961****Part 4: Investments****13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. CWI ALABAMA LLC	100 %	\$ 137,720
15.2. _____	_____ %	\$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor

Name

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

 No. Go to Part 6. Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	-------------------------------------	---	---	------------------------------------

19. Raw materials

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
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20. Work in progress

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
-------	----------------	----------	-------	----------

21. Finished goods, including goods held for resale

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
-------	----------------	----------	-------	----------

22. Other inventory or supplies

_____	MM / DD / YYYY	\$ _____	_____	\$ _____
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23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$ _____

24. Is any of the property listed in Part 5 perishable?

 No Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

 No Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

 No Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

 No. Go to Part 7. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	---	---	------------------------------------

28. Crops—either planted or harvested

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

29. Farm animals Examples: Livestock, poultry, farm-raised fish

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

30. Farm machinery and equipment (Other than titled motor vehicles)

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

31. Farm and fishing supplies, chemicals, and feed

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

32. Other farming and fishing-related property not already listed in Part 6

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative? No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ _____ Valuation method _____ Current value \$ _____**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

39. Office furniture

\$ _____ \$ _____

40. Office fixtures

\$ _____ \$ _____

41. Office equipment, including all computer equipment and communication systems equipment and software

\$ 18,418 \$ 18,418

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1 \$ _____ \$ _____

42.2 \$ _____ \$ _____

42.3 \$ _____ \$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ 18,418

44. Is a depreciation schedule available for any of the property listed in Part 7? No Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description <small>Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)</small>	Net book value of debtor's interest <small>(Where available)</small>	Valuation method used for current value	Current value of debtor's interest
---	---	---	------------------------------------

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

mini excavator, D3 skid steer, CAT 826 compactor	\$ _____	_____	\$ 869,000
--	----------	-------	------------

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ 869,000

52. Is a depreciation schedule available for any of the property listed in Part 8?

- No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

 No. Go to Part 10. Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 1750 Cane Creek Road, Cherokee, AL 35616	Landfill and adjacent property	\$ 6,661,039.40		\$ 6,661,039.40
55.2 2015 Missouri Street, Tuscumbia	Leasehold	\$ 0		\$
55.3 4583 Pryor Road, Madison, AL	Leasehold	\$ 12,600		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 6,661,039.40

57. Is a depreciation schedule available for any of the property listed in Part 9?

 No Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

 No Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

 No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$ 7,604,200.05		\$ 7,604,200.05
65. Goodwill	\$		\$
66. Total of Part 10.			\$ 7,604,200.05

Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No
 Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
 Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

CWI Intercompany loan

Total face amount — doubtful or uncollectible amount = → \$ 1,655,960.86

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

NA

Tax year _____	\$ _____
Tax year _____	\$ _____
Tax year _____	\$ _____

73. Interests in insurance policies or annuities

NA

\$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Please see attached sheet. The current value of debtor's interest is listed here.

\$ 17,190,670

Nature of claim

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Tri Cities Solid Waste and Authority Development

\$ 2,000,000

Nature of claim Counterclaim

Amount requested \$ _____

76. Trusts, equitable or future interests in property

\$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 20,984,301

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No
 Yes

CWI Cherokee LF, LLC

23-52262-sms

Schedule A/B, Part 11, Section 74:

Tyco, 3M, DuPont, ChemGuard

Nature of claim: Tort claim (Negligence, Trespass, product liability)

Amount requested: \$16,709,670

Norton Underwood, P.C.

Nature of claim: Negligence; Breach of Fiduciary Duty

Amount requested: \$200,000

Rice Advisory, LLC

Nature of claim: Intentional interference with contract; breach of fiduciary duty

Amount requested: \$200,000

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 2,190,673	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ _____	
82. Accounts receivable. Copy line 12, Part 3.	\$ 918,961	
83. Investments. Copy line 17, Part 4.	\$ _____	
84. Inventory. Copy line 23, Part 5.	\$ _____	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ _____	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 18,418	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 869,000	
88. Real property. Copy line 56, Part 9. →	\$ 6,661,039	
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 7,604,200	
90. All other assets. Copy line 78, Part 11.	\$ 20,984,301	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 32,585,553	+ 91b. \$ 6,661,039
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$39,246,592

Fill in this information to identify the case:

Debtor name	CWI Cherokee LF LLC
United States Bankruptcy Court for the:	Northern District of Georgia (State)
Case number (If known):	23-52262-sms

Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.**1. Do any creditors have claims secured by debtor's property?**

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.**2.1 Creditor's name**

Caterpillar Financial Services

Describe debtor's property that is subject to a lien

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	

Creditor's mailing address

P.O. Box 730681

Dallas, TX 75373

Mini ex D3 skid

\$ 146,667

\$ 269,00

D6 LGP dozer

Creditor's email address, if known**Date debt was incurred****Last 4 digits of account number****Do multiple creditors have an interest in the same property?** No Yes. Specify each creditor, including this creditor, and its relative priority.**Describe the lien note****Is the creditor an insider or related party?**

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

2.2 Creditor's name

UMB

Describe debtor's property that is subject to a lien

Disposal agreement between debtor and \$ 18,100,000 \$ 30,000,000

Creditor's mailing addressc/o Beth Brownstein, Arent Fox Schiff LLP
1301 Avenue of the Americas, 42nd Floor
New York, NY 10019

the Solid Waste Disposal Authority of the Cities of

Muscle Shoals, Sheffield, and Tuscumbia, Alabama

Creditor's email address, if known

beth.brownstein@arentfox.com

Describe the lien**Contract****Is the creditor an insider or related party?**

- No
 Yes

Is anyone else liable on this claim?

- No
 Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
 Unliquidated
 Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 18,770,667

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

2-3	Creditor's name Shoals SWDA	Describe debtor's property that is subject to a lien Equipment	\$ 524,000	\$ 600,000
Creditor's mailing address 2015 Missouri Street Tuscumbia, AL 35674				
Creditor's email address, if known		Describe the lien		
Date debt was incurred _____		Is the creditor an insider or related party?		
Last 4 digits of account number _____		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	
Do multiple creditors have an interest in the same property?		Is anyone else liable on this claim?		
<input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Have you already specified the relative priority?		<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____				
2-4	Creditor's name	Describe debtor's property that is subject to a lien		
Creditor's mailing address		\$ _____ \$ _____		
Creditor's email address, if known		Describe the lien		
Date debt was incurred _____		Is the creditor an insider or related party?		
Last 4 digits of account number _____		<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Do multiple creditors have an interest in the same property?		Is anyone else liable on this claim?		
<input type="checkbox"/> No		<input type="checkbox"/> No		
<input type="checkbox"/> Yes. Have you already specified the relative priority?		<input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
<input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____				

Debtor

CWI Cherokee LF LLC

Document Page 31 of 61

Case number (if known) 23-52262-sms

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Fill in this information to identify the case:

Document Page 32 of 61

Debtor	CWI Cherokee LF LLC
United States Bankruptcy Court for the:	Northern
	District of GA (State)
Case number	23-52262-sms (If known)

Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).**

- No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1 Priority creditor's name and mailing address	Alabama Department of Labor 649 Monroe Street Montgomery, AL 36131	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>Unknown</u> \$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number	_____	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2 Priority creditor's name and mailing address	Alabama Department of Revenue 50 North Ripley Street Montgomery, AL 36132	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>60,850.04</u> \$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number	_____	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.3 Priority creditor's name and mailing address	Alabama Department of Revenue Business Privilege Tax Section P.O. Box 327320, Montgomery, AL 36124	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>Unknown</u> \$ _____
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number	_____	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

2.4	Priority creditor's name and mailing address	\$ _____	\$ _____
<p>_____ _____ _____</p> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)</p>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <ul style="list-style-type: none"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 	
2.5	Priority creditor's name and mailing address	Unknown	\$ _____
<p>City of Athens _____ P.O. Box 1089 _____ Athens, AL 35612</p> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)</p>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <ul style="list-style-type: none"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 	
2.6	Priority creditor's name and mailing address	\$ 17,291.53	\$ 14,358.85
<p>Internal Revenue Service _____ Centralized Insolvency Operation _____ P.O. Box 7346, Philadelphia, PA 19101</p> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)</p>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <ul style="list-style-type: none"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 	
2.7	Priority creditor's name and mailing address	\$ _____	
<p>_____ _____ _____</p> <p>Date or dates debt was incurred</p> <hr/> <p>Last 4 digits of account number _____</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)</p>		As of the petition filing date, the claim is: <i>Check all that apply.</i> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 	

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.-8	Priority creditor's name and mailing address	\$ _____	\$ _____
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.-9	Priority creditor's name and mailing address	\$ 260.00	\$ _____
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.-10	Priority creditor's name and mailing address	\$ _____	\$ _____
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.-11	Priority creditor's name and mailing address	\$ Unknown	\$ _____
	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.12	Priority creditor's name and mailing address	Unknown	
	United States Treasury P.O. Box 742562 Cincinnati, OH 45280	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: <hr/>	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		
2.13	Priority creditor's name and mailing address	\$ _____	
	_____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: <hr/>	
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		
2.14	Priority creditor's name and mailing address	\$ _____	
	_____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: <hr/>	
	Last 4 digits of account number	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		
2.15	Priority creditor's name and mailing address	\$ _____	
	_____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date or dates debt was incurred	Basis for the claim: <hr/>	
	Last 4 digits of account number	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.1 Nonpriority creditor's name and mailing address 10 Kings LLC 80 West Wieuca Road NE, Suite 170 Atlanta, GA 30342	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: note holder
	\$ 200,000
Date or dates debt was incurred	Is the claim subject to offset?
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address ADCO Pipe & Supply, LLC 4014 Florece Blvd Florence, AL 35634	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Landfill vendor
	\$ 9,615.27
Date or dates debt was incurred	Is the claim subject to offset?
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3 Nonpriority creditor's name and mailing address AT&T c/o Business Bankrupcty Arlington, TX 76004	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Phone bills
	\$ Unknown
Date or dates debt was incurred	Is the claim subject to offset?
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4 Nonpriority creditor's name and mailing address AJ Equity 1648 61st Street Brooklyn, NY 11204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Merchant Capital Advance
	\$ 300,000
Date or dates debt was incurred	Is the claim subject to offset?
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5 Nonpriority creditor's name and mailing address American Services, LLC 2281 Stateline Road W Southaven, MS 38671	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Landfill vendor
	\$ 162,727
Date or dates debt was incurred	Is the claim subject to offset?
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6 Nonpriority creditor's name and mailing address Anderson Trucking, LLC 5505 McCaleb Drive Dora, AL 35062	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Hauling
	\$ Unknown
Date or dates debt was incurred	Is the claim subject to offset?
Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address Andy's Wrecker Service 20850 Highway 72 Tuscumbia, AL 35674		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ Unknown
			Basis for the claim: Landfill vendor	
	Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number	-----		
3.8	Nonpriority creditor's name and mailing address Apache Electrical Contractors Inc. 115 Ryland Ridge Circle, Unit 39 Huntsville, AL 35811		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
			Basis for the claim: Landfill vendor	
	Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number	-----		
3.9	Nonpriority creditor's name and mailing address Arnold's Truck Stop, Inc. 1460 Highway 20 Tuscumbia, AL 35674		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 621.05
			Basis for the claim: Truck parts and fuel	
	Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number	-----		
3.10	Nonpriority creditor's name and mailing address Atomic Transport, LLC P.O. Box 2548 Chattanooga, TN 37409		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 134,330.40
			Basis for the claim: Landfill vendor	
	Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number	-----		
3.11	Nonpriority creditor's name and mailing address Auto-Owners Insurance P.O. Box 740312 Cincinnati, OH 45274		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
			Basis for the claim: Insurance for Landfill Equipment	
	Date or dates debt was incurred		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number	-----		

Part 2: Additional Page

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Amount of claim

3.12	Nonpriority creditor's name and mailing address BT's Tires, Towing & Roadside 19592 Piney Chapel Road Athens, AL 35614	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Roadside Services	\$ Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.13	Nonpriority creditor's name and mailing address Bill Cohen 3630 Peachtree Road, Suite 940 Atlanta, GA 30326	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: note holder	\$ 300,000
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.14	Nonpriority creditor's name and mailing address Bluevine Capital Inc. 30 Montgomery Street, Suite 1400 Jersey City, NJ 07302	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Merchant Capital Advance	\$ _____
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.15	Nonpriority creditor's name and mailing address Brickstone Fund 5314 16th Avenue, Suite 139 Brooklyn, NY 11204	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Merchant Capital Advance	\$ 300,000
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.16	Nonpriority creditor's name and mailing address Burr & Forman LLP P.O. Box 830719 Birmingham, AL 35283	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Legal fees	\$ 87,809.25
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3.17	Nonpriority creditor's name and mailing address Byars Wright, Inc. P.O. Box 1309 Jasper, AL 35501	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 4,012.51
		Basis for the claim: Insurance Broker	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18	Nonpriority creditor's name and mailing address CDG Engineering P.O. Box 278 Andalusia, AL 36420	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 135,968.77
		Basis for the claim: Engineering fees	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.19	Nonpriority creditor's name and mailing address CT Corporation P.O. Box 4349 Carol Stream, IL 60197	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 201.96
		Basis for the claim: Agent fees	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.20	Nonpriority creditor's name and mailing address CWI Enterprises, LLC 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ Unknown
		Basis for the claim: Subsidiary	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.21	Nonpriority creditor's name and mailing address Carolina Software P.O. Box 3097 Wilmington, NC 28406	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 800.00
		Basis for the claim: Software maintenance	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3.22	Nonpriority creditor's name and mailing address Cherokee Auto Parts 8430 Hwy 72 Cherokee, AL 35616	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: Auto parts	\$ 4,261.81
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23 Nonpriority creditor's name and mailing address Civil Group, LLC 919 E Avalon Avenue, Suite B Muscle Shoals, AL 35616		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Survey services	\$ 4,200.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24 Nonpriority creditor's name and mailing address CliftonLarsonAllen LLP P.O. Box 740863 Atlanta, GA 30374		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Accounting services	\$ 71,000
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25 Nonpriority creditor's name and mailing address Comcast P.O. Box 71211 Charlotte, NC 28272		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Cable and wifi	\$ 500.00
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.26 Nonpriority creditor's name and mailing address Corporate Billing, LLC P.O. Box 830604, Department 100 Birmingham, AL 35283		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____	\$ Unknown
Date or dates debt was incurred _____ Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

327	Nonpriority creditor's name and mailing address Davis Services 53400 Hawk Pride Mountain Road Tuscumbia, AL 35674	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 925.00
		Basis for the claim: Trucking Services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
328	Nonpriority creditor's name and mailing address Denali P.O. Box 740903 Atlanta, GA 30374	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 138,900
		Basis for the claim: Leachate disposal	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
329	Nonpriority creditor's name and mailing address Dentons Sirote P.C. P.O. Box 55509 Birmingham, AL 35255	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 42,000
		Basis for the claim: Legal Services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
330	Nonpriority creditor's name and mailing address Derek Griffin 80 W. Wieuca Road NE, Suite 170 Atlanta, GA 30342	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 100,000
		Basis for the claim: Note holder	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address Evergreen Environmental Partners 300 Noble Hill Road Attalla, AL 35954	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 77,198.06
		Basis for the claim: Disposal services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3.32	Nonpriority creditor's name and mailing address Fundamental Capital SPE 100 Garden City Plaza, Suite 410 Garden City, NY 11530	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 58,000
		Basis for the claim: Merchant Capital Advance	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.33	Nonpriority creditor's name and mailing address GT Michelli Co., Inc. 130 Brookhollow Esplanade Harahan, LA 70123	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,762.50
		Basis for the claim: Scale services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.34	Nonpriority creditor's name and mailing address Hines Tire and Service Center 419 Court Street Florence, AL 35630	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 124.80
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35	Nonpriority creditor's name and mailing address Integrated Corporate Solutions, Inc. P.O. Box 443 Florence, AL 35631	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,573.33
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.36	Nonpriority creditor's name and mailing address J.T. Ray Company 450 Production Ave Madison, AL 35758	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 129.14
		Basis for the claim: Repair services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

3.37	Nonpriority creditor's name and mailing address JLW Contracting LLC 2310 Bennett Road Jasper, AL 35503	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 140,000
		Basis for the claim: Site services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.38	Nonpriority creditor's name and mailing address James E. Alexander Land Surveying P.O. Box 160 Sheffield, AL 35660	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 8,675
		Basis for the claim: Survey services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.39	Nonpriority creditor's name and mailing address Leigh, King, Norton & Underwood P.C. 603 East 2nd Street Sheffield, AL 35660	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,062.50
		Basis for the claim: Accounting services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.40	Nonpriority creditor's name and mailing address Madison Mobile Storage, Inc. P.O. Box 2222 Decatur, AL 35609	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,200
		Basis for the claim: Storage fees	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41	Nonpriority creditor's name and mailing address Marshall Roberts 80 W. Wieuca Road NE, Suite 170 Atlanta, GA 30342	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 100,000
		Basis for the claim: Note holder	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.42	Nonpriority creditor's name and mailing address Mid South Septic 11284 Gulf Stream Road Arlington, TN 38002	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 67,452
		Basis for the claim: Leachate disposal	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.43	Nonpriority creditor's name and mailing address The McPherson Companies, Inc. P.O. Box 11407 Birmingham, AL 35246	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 82,056.04
		Basis for the claim: Fuel services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.44	Nonpriority creditor's name and mailing address OTR Mobile 2114 E Fairview Ave Johnson City, TN 37601	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 123.76
		Basis for the claim: Internet	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.45	Nonpriority creditor's name and mailing address P&F Industrial Enterprises 1140 4th Street Cherokee, AL 35616	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 41,523.84
		Basis for the claim: Royalty Payments	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.46	Nonpriority creditor's name and mailing address Phil Adams Walker Building, 205 South Ninth Street P.O. Box 36803	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 22,000
		Basis for the claim: Mediator services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

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Amount of claim

347	Nonpriority creditor's name and mailing address Republic Services P.O. Box 677839 Dallas, TX 75267	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 106,344.53
		Basis for the claim: Disposal services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
348	Nonpriority creditor's name and mailing address SEAM Financial LLC P.O. Box 1506 O'Fallon, IL 62269	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
		Basis for the claim: Insurance	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
349	Nonpriority creditor's name and mailing address Todd Moreland P.O. Box 3069 Chattanooga, TN 37409	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 150,000
		Basis for the claim: Electric services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
350	Nonpriority creditor's name and mailing address Thompson Tractor Co., Inc. P.O. Box 934005 Atlanta, GA 31193	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 186,000
		Basis for the claim: Vendor	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
351	Nonpriority creditor's name and mailing address TEC Cherokee Office P.O. Box 23728 Jackson, MS 39225	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 143.26
		Basis for the claim: Internet	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	18

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.52	Nonpriority creditor's name and mailing address Terrain Technology, Inc. 2993 Heavenly Lane Snellville, GA 30078	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 1,000
		Basis for the claim: Engineering fees	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.53	Nonpriority creditor's name and mailing address United Site Services of MS, LLC 150 Pioneer Drive Killen, AL 35645	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,616.27
		Basis for the claim: Dumpster services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.54	Nonpriority creditor's name and mailing address Valicor Environmental Services Department 77380 P.O. Box 77000 Huntsville, AL 35806	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 76,147
		Basis for the claim: Leachate disposal	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.55	Nonpriority creditor's name and mailing address Waste Connections P.O. Box 311 Walnut, MS 38683	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 12,000
		Basis for the claim: Fees	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.56	Nonpriority creditor's name and mailing address Wayne Holt 3210 Hatch Blvd Sheffield, AL 35660	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
		Basis for the claim: Truck repair services	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

357	Nonpriority creditor's name and mailing address Wes Shafto 1818 Avenue of Americas Monroe, LA 71201	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 200,000
		Basis for the claim: Note holder	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
358	Nonpriority creditor's name and mailing address CWI Alabama, LLC 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 194,525
		Basis for the claim: Loan	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
359	Nonpriority creditor's name and mailing address Steve Witmer 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,253,737
		Basis for the claim: Loan	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
360	Nonpriority creditor's name and mailing address CWI Enterprises, LLC 3284 Northside Parkway, Suite 600 Atlanta, GA 30327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 486,203
		Basis for the claim: Loan	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
361	Nonpriority creditor's name and mailing address Athens Utilities PO Box 830200 Birmingham, AL 36283	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 883.25
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <input type="checkbox"/> Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	Amount of claim
Sheffield Utilities PO Box 580 Sheffield, AL 35060	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ 5359
Basis for the claim: _____		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address		
Tuscumbia Utilities PO Box 269 Tuscumbia, AL 35674	As of the petition filing date, the claim is: Check all that apply.	\$ Unknown
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address		
Walker County Circuit Clerk 1801 3rd Ave, Suite 205 Jasper, AL 35501	As of the petition filing date, the claim is: Check all that apply.	\$ Unknown
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
Basis for the claim: _____		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address		
Tri Cities/ Shoals Solid Waste Disposal Authority PO Box 408 Tuscumbia, AL 35674	As of the petition filing date, the claim is: Check all that apply.	\$ 20,273.84
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input type="checkbox"/> No <input type="checkbox"/> Yes	
3. <input type="checkbox"/> Nonpriority creditor's name and mailing address		
_____	As of the petition filing date, the claim is: Check all that apply.	\$ _____
_____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Basis for the claim: _____		
Date or dates debt was incurred	Is the claim subject to offset?	
Last 4 digits of account number	<input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.2.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.3.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.4.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.5.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.6.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.7.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.8.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.9.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.10.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.11.	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a. \$ 75,468.89

5b. Total claims from Part 2

5b. + \$ 5,296,985.11

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ 5,372,454

Fill in this information to identify the case:

Debtor name	CWI Cherokee LF LLC		
United States Bankruptcy Court for the:	Northern	District of	Georgia
Case number (If known):	23-52262-sms	Chapter	11

Check if this is an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	Tri Cities Solid Waste and Development Authority
	Landfill lease	c/o Tim Leigh
	96 years, 3 months	Leigh, King & Associates, P.C. 603 East 2nd Street Sheffield, AL 35660
2.2	State what the contract or lease is for and the nature of the debtor's interest	Tri Cities Solid Waste and Development Authority
	Shoals Transfer Station	c/o Tim Leigh
	72 years, 3 months	Leigh, King & Associates, P.C. 603 East 2nd Street Sheffield, AL 35660
2.3	State what the contract or lease is for and the nature of the debtor's interest	Shoals Solid Waste and Development Authority
	Equipment Lease	c/o Tim Leigh
	0	Leigh, King & Associates, P.C. 603 East 2nd Street Sheffield, AL 35660
2.4	State what the contract or lease is for and the nature of the debtor's interest	Tri Cities Solid Waste and Development Authority
	Disposal Contract	c/o Tim Leigh
	96 years, 3 months	Leigh, King & Associates, P.C. 603 East 2nd Street Sheffield, AL 35660
2.5	State what the contract or lease is for and the nature of the debtor's interest	
	State the term remaining	
	List the contract number of any government contract	

Debtor

CWI Cherokee LF LLC

Name

Case number (if known) 23-52262-sms

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2..	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Fill in this information to identify the case:

Debtor name	CWI Cherokee LF LLC
United States Bankruptcy Court for the:	Northern
	District of Georgia (State)
Case number (If known):	23-52262-sms

Check if this is an amended filing

Official Form 206HSchedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 CWI Enterprises, LLC	3284 Northside Parkway, Suite 600 Street	AJ Equity	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	Atlanta GA 30327 City State ZIP Code		
2.2 CWI Enterprises, LLC	3284 Northside Parkway, Suite 600 Street	Brickstone Group	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	Atlanta GA 30327 City State ZIP Code		
2.3 Steve Witmer	3284 Northside Parkway, Suite 600 Street	AJ Equity	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	Atlanta, GA 30327 City State ZIP Code		
2.4 Steve Witmer	Street	Brickstone Group	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code		
2.5	Street		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code		
2.6	Street		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City State ZIP Code		

[REDACTED] Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		

Fill in this information to identify the case:

Debtor name	CWI Cherokee LF LLC
United States Bankruptcy Court for the:	Northern
	District of Georgia (State)
Case number (If known):	23-52262-sms

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*.....

\$ 6,661,039

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*.....

\$ 32,585,553

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*.....

\$ 39,246,592

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$ 18,769,667

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$ 75,468.89

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$ 5,296,985.11

4. **Total liabilities**.....

Lines 2 + 3a + 3b

\$ 24,142,121

Fill in this information to identify the case:

Debtor name	CWI CHEROKEE LF LLC	
United States Bankruptcy Court for the:	NORTHERN	District of GA (State)
Case number (If known):		

Check if this is an amended filing

Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Todd Moreland PO Box 3069 Chattanooga TN 37404		Electric Services				\$150,000
2	AJ Equity 1648 61st Street Brooklyn NY 11204		Capital Advance				\$300,000
3	Atomic Transport PO Box 2548 Chattanooga TN 80903	423-681-2708	Vendor				\$134,330
4	Brickstone Fund 5314 16th Ave Suite 139 Brooklyn NY 11204		Capital Advance				\$300,000
5	Bill Cohen 3630 Peachtree Road, Suite 940 Atlanta, Georgia 30326	404-231-3414	note				\$300,000
6	Wes Shafto 1818 Avenue of Americas Monroe, LA	318-388-8915	note				\$200,000
7	10 Kings LLC 80 W. Wieuca Road N.E., Suite 170 Atlanta, GA 30342		note				\$200,000
8	Marshall Roberts 80 W. Wieuca Road N.E., Suite 170 Atlanta, GA 30342		note				\$100,000

Debtor	CWI CHEROKEE LF LLC Name	Case number (if known) _____				
Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9	Derek Griffin 80 W. Wieuca Road N.E., Suite 170 Atlanta, GA 30342		note			\$100,000
10	The McPherson Companies, Inc. 5051 Cardinal Street Trussville, AL 35173	205-910-1990	Vendor			\$82,056.04
11	Evergreen Environmental 300 Noble Hill Rd Attalla AL 35954-0010	256-960-7426	Vendor			\$77,198.06
12	JLW Contracting LLC 2310 Bennett Rd Jasper AL 35503	205-522-3547	Vendor			\$140,000
13	Denali P.O. Box 740903 Atlanta, GA 30374-0903		Vendor			\$138,900
14	American Services, LLC 2281 Stateline Rd W Southaven, MS 38671		Vendor			\$162,727
15	Burr & Forman LLP PO Box 830719 Birmingham, AL 35283		professional fees			87,809.25
16	Mid-South Septic 11284 Gulf Stream Road Arlington, TN 38002		vendor			67,452
17	Thompson Tractor PO Box 934005 Atlanta, Georgia 31193	205-841-8601	Vendor			\$186,000
18	CDG Engineering PO Box 278 Andalusia AL 36420	334-222-9431	Vendor			\$125,000
19	Republic Services PO Box 677839 Dallas, TX 75267	256-327-4458	Vendor			\$106,344
20	Valicor Environmental Services Dept 77380 PO Box 77000 Detroit, MI 48287		Vendor			\$76,147

Fill in this information to identify the case and this filing:

Debtor Name	CWI Cherokee LF LLC		
United States Bankruptcy Court for the:	Northern	District of	Georgia
Case number (if known):	23-52262-sms		

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule _____
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/04/2023

MM / DD / YYYY

Signature of individual signing on behalf of debtor

Stephen E. Witmer
Printed name
Member / Manager
Position or relationship to debtor

United States Bankruptcy Court
Northern District of Georgia, Atlanta Division

In re CWI CHEROKEE LF LLC _____ Case No. 23-52262-SMS _____
Debtor(s) Chapter 11 _____

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
CWI ALABAMA MEMBER LLC 3284 Northside Parkway, Suite 600 Atlanta, Georgia 30327	MEMBER	100%	

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Manager** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date

04/04/2023

Signature



by Stephen E. Witmer, as Manager of CWI Alabama
Member LLC, Manager of Debtor

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court

NORTHERN District Of GEORGIA

In re

CWI CHEROKEE LF LLC

Case No. 23-52262-SMS

Debtor

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

- Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	<u>\$ 425-550/hr**</u>
Prior to the filing of this statement I have received	Pre-petition, counsel was paid \$6,200 for services related to preparation for this case, in addition to receiving a \$68,800 retainer.
Balance Due	\$No pre-petition balance is due.

- The source of the compensation paid to me was:

Debtor Other (specify) CWI ALABAMA, LLC (Subsidiary of Debtor)

- The source of compensation to be paid to me is:

Debtor Other (specify)

- I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

**Counsel has agreed to provide services to Debtor at its standard hourly rates. The primary attorneys expected to work on this matter are John A. Christy, whose current hourly rate is \$550 per hour, and Jonathan A. Akins, whose current hourly rate is \$425 per hour. Counsel will endeavor to use associates and contract attorneys to provide services at lower hourly rates where appropriate, which rates currently range from \$285 to \$400 per hour.

- 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

3/31/2023
Date

/s/ John A. Christy
Signature of Attorney

Schreeder, Wheeler & Flint, LLP
Name of law firm